## FORM D Amendment

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**PROCESSED** 

SEC Mail Processing Section

110

FORM D NOTICE OF SALE OF SECURITIES

OMB Number: 3235-0076 Expires: Estimated average burden Hours per response....16.00

OMB APPROVAL

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Mashington, DC

JUN 11 2008 PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemp file the appropriate federal notice will not result in a loss of an available state exemption predicated on the filing of a federal notice

predicated on the ining of a federal notice.	08052208
Name of Offering ( check if this is an amendment and name has changed, and indicate change)  \$2,370,000 Equity Financing	00002208
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	on 4(6) ULOE
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	·
Name of Issuer ( check if this is an amendment and name has changed, and indicate change)	
BULLION RIVER GOLD CORP.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number
3500 Lakeside Court, Suite 200	775-324-4881
Reno, Nevada 89509	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number
(if different from Executive Offices)	( )
Brief Description of Business	
Mineral exploration company.	
Type of Business Organization	_
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):	limited liability
company	
☐ business trust ☐ limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 6 0 1 🛛 🗖 Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	
State:  CN for Canada; FN for other foreign jurisdiction)  N	V

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to this notice constitutes a part of this notice and must be completed.

	A. B.	ASIC IDENTIFIC	ATIO	N DATA				
2. Enter the information requ	ested for the following:							
• Each promoter of the	issuer, if the issuer has be	een organized withi	n the p	ast five years;				
<ul> <li>Each beneficial owner securities of the issuer</li> </ul>	r having the power to vot r;	e or dispose, or dire	ct the	vote or disposi	tion of	, 10% or mo	ore of	a class of equity
• Each executive office	r and director of corporat	e issuers and of corp	orate	general and ma	anaginį	g partners o	f partr	ership issuers; and
<ul> <li>Each general and man</li> </ul>	aging partner of partners	hip issuers.						
Check Box(es) that Apply:	Promoter [	Beneficial Owner	$\boxtimes$	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)							
TIM CALLAWAY								
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
3500 LAKESIDE COURT, RENO, NEVADA 89509								
Check Box(es) that Apply:	Promoter [	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)	••						
DR. ING. JORG OTZEN								
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
3500 LAKESIDE COURT,		•						
RENO, NEVADA 89509								
Check Box(es) that Apply:	Promoter [	Beneficial Owner	$\boxtimes$	Executive Officer	$\boxtimes$	Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)							
DR. RENE JUCHLER								
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
3500 LAKESIDE COURT,	SUITE 200							
RENO, NEVADA 89509								
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)					•	•	
BANQUE PASCHE (LIECH	TENSTEIN) SA							
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
AUSTRASSE 61								
FL-9490 VADUZ								
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)							
ELTON PARTICIPATION (	GROUP							
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
C/O MORGAN & MORGAN PASEA ESTATE, ROAD TO								
TORTOLA, B.V.I.								
Check Box(es) that Apply:	Promoter [	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)							
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		·				
	(Use blank sheet, or cop	y and use additional	copie	s of this sheet,	as nec	essary)		

				B. I	NFORMA'	ΓΙΟΝ ABO	UT OFFE	ERING				
1. Has t	he issuer so	ld, or does		itend to sel	ll, to non-ac	credited inv	estors in t	his offering			Yes	No
2. What	is the mini	mum inves				nx, Colum ny individu		, under OL	JL		\$2	50,000
3. Does	the offerin	g <b>permit</b> joi	nt ownershi	p of a sing	le unit?						Yes ⊠	No
comi offer with	mission or ing. If a per a state or s	similar rer son to be l tates, list tl	nuneration isted is an a	for solicited paths the broker	ation of pu person or ag or dealer.	rchasers in gent of a bro	connection oker or dea n five (5)	on with sal ler registere persons to	es of secu ed with the be listed ar	lirectly, any rities in the SEC and/or e associated		
Full Nar	ne (Last na	me first, if	individual)									
Busines	s or Resider	ice Address	s (Number a	nd Street,	City, State,	Zip Code)						
Name of	f Associated	l Broker or	Dealer									
States in	Which Per	son Listed	Has Solicite	ed or Inten	ds to Solicit	Purchasers						
(Check	"All States	" or check	individual S	States)					••••••			All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] X [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last na	me first, if	individual)	_								
Busines	s or Reside	nce Address	s (Number a	and Street,	City, State,	Zip Code)						
Name o	f Associated	l Broker or	Dealer			<del> </del>						
States in	Which Per	son Listed	Has Solicite	ed or Inten	ds to Solici	t Purchasers	;			•		
(Check	"All States	" or check	individual S	States)	***************************************				***************************************	•••••••		All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [Mi] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	ne (Last na		individual)	•	-		•					•
Busines	s or Reside	nce Addres	s (Number a	ınd Street,	City, State,	Zip Code)						
Name or	f Associate	l Broker or	Dealer				<u></u>					
States in	Which Per	son Listed	Has Solicite	ed or Inten	ds to Solici	t Purchasers	3					
(Check	"All States	or check	individual S	States)		••••••	••••••					All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☑ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Aggregate ffering Price	P	Amount Already Sold
Debt	\$	0	\$	0
Equity	\$	2,370,000	\$	2,370,000
Common Preferred (see below, Convertible Securities)	•			
Convertible Securities:	\$	0	\$	0
Partnership Interests	\$	0	\$	0
Other (Specify )	\$	0	\$	0
Total	\$	2,370,000	\$	2,370,000
Answer also in Appendix, Column 3, if filing under ULOE.	•			
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."				A
		Number Investors		Aggregate Dollar Amount Of Purchases
Accredited Investors		2	\$	2,370,000
Non-accredited Investors		0	\$	0
Total (for filings under Rule 504 only)		0	\$	0
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
Type of offering		Type of Security		Dollar Amount Sold
Rule 505		Security		Solu
Regulation A		•••		
Rule 504				
Total				
j otai	_			
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent's Fees			\$	0
Printing and Engraving Costs			\$	0
Legal Fees (for issuer's counsel)	•••••		\$	10,000
Accounting Fees			\$	0
			_	
Engineering Fees	•••••		\$	0
Engineering Fees			\$ \$	0 0

C. OFFERING PRICE, NUMBER OF INVESTOR	RS, EXPENSES	AND U	JSE OF PROC	CEEDS		
b. Enter the difference between the aggregate offering price given in retotal expenses furnished in response to Part C – Question 4.a. This differ to the issuer."	rence is the "adj	justed gr	oss proceeds	\$	i _	2,360,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer use the purposes shown. If the amount for any purpose is not known, furnithe left of the estimate. The total of the payments listed must equal the set forth in response to Part C – Question 4.b. above.	ish an estimate	and che	ck the box to			
			Payments to Officers, Directors & Affiliates			ments To Others
Salaries and fees			\$ <u> </u>	_ 🗆	\$	0
Purchase of real estate			s <u>o</u>		\$	0
Purchase, rental or leasing and installation of machinery and equipment			\$ 0		\$	0
Construction or leasing of plant buildings and facilities	••••••		\$	_ 🗆	\$	0
Acquisition of other businesses (including the value of securities involved in Offering that may be used in exchange for the assets or securities of another pursuant to a merger)	issuer	П	\$ 0	П	\$	0
Repayment of indebtedness		_	\$ <del>0</del>		\$	500,000
Working capital (includes product licensing and advertising and marketing)			\$ 0	_ 🛛	\$	1,860,000
Other (specify):					\$	
Column Totals		_	\$ <u>0</u>	_ □	\$ \$	<b>2,360,000</b>
Total Payments Listed (column totals added)					\$	2,360,000
D. FEDERAL SIG	GNATURE					
The issuer has duly caused this notice to be signed by the undersigned d following signature constitutes an undertaking by the issuer to furnish to the of its staff, the information furnished by the issuer to any non-accredited inv	uly authorized ne U.S. Securition	es and E	xchange Comi	mission, u		
Issuer (Print or Type)  BULLION RIVER GOLD CORP.	Signature	-6	ra	Dat MA		3, 2008
	Title of Signer ( CHIEF EXEC					
TIM A. CALLAWAY	CHIEF EXEC	ULIVE	OFFICER			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)

	E. STATE SIGNATURE							
1. Is any party described in 17 CFR 230.262 presently	y subject to any of the disqualification provisions of such	rule? Yes No						
See Ap	pendix, Column 5, for state response.							
2. The undersigned issuer hereby undertakes to furnish D (17 CFR 239.500) at such times as required by sta	to any state administrator of any state in which this notice ate law.	e is filed, a notice on Form						
3. The undersigned issuer hereby undertakes to furnish to offerees.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
	amiliar with the conditions that must be satisfied to be entited this notice is filed and understands that the issuer claim conditions have been satisfied.							
The issuer has read this notification and knows the coundersigned duly authorized person.	ontents to be true and has duly caused this notice to be s	igned on its behalf by the						
Issuer (Print or Type) BULLION RIVER GOLD CORP.	Signature all	Date MAY 28, 2008						
Name of Signer (Print or Type) TIM A. CALLAWAY	Title of Signer (Print or Type)  CHIEF EXECUTIVE OFFICER	•						

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	Intend non-acc	to sell to credited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
ні	ļ								
ID									
IL								e e	
IN									
IA									
KS									
KY									
LA									
МЕ									
MD									
MA									
МІ	[								
MN					-				
MS									

## APPENDIX

1	Intend non-ac investor	to sell to credited s in State – Item 1)	3 Type of security and aggregate offering price offered in state (Part C – Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
МО									
МТ									
NE	1								
NV									
NH									
NJ									
NM								13   15   15	
NY		х	\$2,370,000 Common Stock	1	\$250,000	0	0		х
NC									
ND									
ОН	<u> </u>								
ок									
OR									
PA	<u> </u>								
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR			,						

END